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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/664,213	09/16/2003	Hassan Mostafavi	005513P021	3361

7590 03/10/2010  
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EXAMINER
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CWERN, JONATHAN

ART UNIT	PAPER NUMBER
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3737

MAIL DATE	DELIVERY MODE
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03/10/2010

PAPER

**Please find below and/or attached an Office communication concerning this application or proceeding.**

The time period for reply, if any, is set in the attached communication.

<b>Office Action Summary</b>	<b>Application No.</b> 10/664,213	<b>Applicant(s)</b> MOSTAFAVI ET AL.	
	<b>Examiner</b> Jonathan G. Cwern	<b>Art Unit</b> 3737	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

### Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

### Status

- 1) ☒ Responsive to communication(s) filed on 27 October 2009.
- 2a) ☒ This action is **FINAL**. 2b) ☐ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

### Disposition of Claims

- 4) ☒ Claim(s) 1-16, 58, 59, 62-79 and 81-87 is/are pending in the application.
- 4a) Of the above claim(s) \_\_\_\_\_ is/are withdrawn from consideration.
- 5) ☐ Claim(s) \_\_\_\_\_ is/are allowed.
- 6) ☒ Claim(s) 1-16, 58, 59, 62-79 and 81-87 is/are rejected.
- 7) ☐ Claim(s) \_\_\_\_\_ is/are objected to.
- 8) ☐ Claim(s) \_\_\_\_\_ are subject to restriction and/or election requirement.

### Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on \_\_\_\_\_ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.  
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).  
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

### Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some \* c) ☐ None of:
- ☐ Certified copies of the priority documents have been received.
  - ☐ Certified copies of the priority documents have been received in Application No. \_\_\_\_\_.
  - ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

\* See the attached detailed Office action for a list of the certified copies not received.

### Attachment(s)

- |   |   |
|---|---|
| 1) <input type="checkbox"/> Notice of References Cited (PTO-892)                    | 4) <input type="checkbox"/> Interview Summary (PTO-413)           |
| 2) <input type="checkbox"/> Notice of Draftperson's Patent Drawing Review (PTO-948) | Paper No(s)/Mail Date. _____                                      |
| 3) <input type="checkbox"/> Information Disclosure Statement(s) (PTO/SB/08)         | 5) <input type="checkbox"/> Notice of Informal Patent Application |
| Paper No(s)/Mail Date _____   | 6) <input type="checkbox"/> Other: _____                          |

## DETAILED ACTION

### ***Claim Rejections - 35 USC § 103***

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

This application currently names joint inventors. In considering patentability of the claims under 35 U.S.C. 103(a), the examiner presumes that the subject matter of the various claims was commonly owned at the time any inventions covered therein were made absent any evidence to the contrary. Applicant is advised of the obligation under 37 CFR 1.56 to point out the inventor and invention dates of each claim that was not commonly owned at the time a later invention was made in order for the examiner to consider the applicability of 35 U.S.C. 103(c) and potential 35 U.S.C. 102(e), (f) or (g) prior art under 35 U.S.C. 103(a).

Claims 1-3, 5-7, 13-14, 16, 49-58, 62, 76-77, 82, 84, and 87 are rejected under 35 U.S.C. 103(a) as being unpatentable over Mate et al. (US 2002/0193685) in view of Cosman (US 2002/0065461).

Mate et al. show a guided radiation therapy system. The radiation delivery source can be a linear accelerator, or any other type of radiation therapy device ([0034]). The radiation device has a machine isocenter associated with it. This is the isocenter of the radiation beam ([0035]). A plurality of markers are positioned in the

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target to mark the actual location of the target in the body. These markers define a target isocenter. The target isocenter is selected as part of a treatment planning procedure by a treatment planning system ([0054]). The position and orientation of each marker is obtained and used to determine the precise location of the target isocenter ([0036]-[0037]). The markers can be implanted in the patient, and delivered by an applicator needle ([0041]). The actual position of the target isocenter is compared to the position of the machine isocenter, and if they are spatially misaligned, the target can be moved relative to the machine isocenter. Once the target isocenter and machine isocenter are coincident, the radiation treatment is applied ([0039]).

Determining the position manually would be a well known and obvious modification to one of ordinary skill in the art. Mate et al. fail to show using more than one imaging modality.

Cosman discloses a surgical positioning system. Cosman teaches that X-ray imaging can be used to further refine the positioning of the isocenter. The X-ray images can aid in determining the position of markers within the body. The use of X-ray imaging further improves the accuracy of the alignment ([0064]-[0069]). Furthermore, the same imaging modality could be used. Cosman teaches the use of preoperative CT scanning ([0064]) and the use of interoperative CT scanning as well ([0065]). These imaging systems are located on different machines, one being used for planning the treatment and one being used for the actual treatment. As indicated by applicant's specification ([0064]), various configurations are known in the art and may be used, including imagers located on a gantry or as part of a treatment table. Cosman also

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teaches that both the treatment machine and the patient can be moved to accomplish desired positional relationships ([0024]). The treatment machine is rotatable ([0025]). A multileaf collimator or any other type of known collimator can be used as well ([0026]). The angle and shape of the treatment beam can be controlled ([0043]).

It would have been obvious to one of ordinary skill in the art, at the time the invention was made, to have used a second imaging system to align the patient and the treatment beam as taught by Cosman in the system of Mate et al. The use of a second imaging system will increase the accuracy of the alignment.

Claims 4 and 83 are rejected under 35 U.S.C. 103(a) as being unpatentable over Mate et al. (US 2002/0193685) in view of Cosman (US 2002/0065461) as applied to claim 1 above, and further in view of Jaffray et al. (US 2003/0007601).

Jaffray et al. disclose a radiation therapy system. Jaffray et al. teach that kV or MV imaging can be used to aid in lesion location ([0008]).

It would have been obvious to one of ordinary skill in the art at the time the invention was made to have modified the device of Mate et al. with any imaging modality which will aid in the radiation therapy process, kV or MV imaging between two such possible imaging modalities which are known for aiding in lesion location.

Claims 8-9, 12, 78-79, and 81 are rejected under 35 U.S.C. 103(a) as being unpatentable over Mate et al. (US 2002/0193685) in view of Cosman (US

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2002/0065461) as applied to claims 6 and 7 above, and further in view of Jang (US 5757953).

Jang discloses an automated method and system of region decomposition in digital radiographic images. Jang teaches that shape filtering and connected component analysis are used to decompose an image into meaningful subregions (column 11, lines 30-67). The median filters can be used to smooth the image (column 9, line 3). The details of the operation of median filtering are old and well-known in the art.

It would have been obvious to one of ordinary skill in the art, at the time the invention was made, to have used a median filter and connected component analysis as taught by Jang, in the combined system of Mate et al. and Cosman. One of ordinary skill in the art would have used these techniques to divide the image into useful regions, and to find the location of the markers in the images. In addition, by determining the location of markers in the image, the user would know which objects are not markers. It would be obvious to one of ordinary skill in the art to make sure that these objects would then not be considered as markers, and would not be used for any further steps, such as during the alignment.

Claims 10-11 are rejected under 35 U.S.C. 103(a) as being unpatentable over Mate et al. (US 2002/0193685) in view of Cosman (US 2002/0065461) and Jang (US 5757953) as applied to claim 8 above, and further in view of Gerig et al. (US 5446548).

Gerig et al. disclose a patient positioning and monitoring system. Gerig et al. teach the use of an epipolar line constraint (column 5, lines 19-43). Such a technique is old and well known in the art.

It would have been obvious to one of ordinary skill in the art, at the time the invention was made, to have used an epipolar line constraint technique as taught by Gerig et al. in the combined system of Mate et al., Cosman, and Jang. One of ordinary skill in the art would use such a technique to aid in aligning the markers in the sets of images.

Claims 15, 63-72, and 74 are rejected under 35 U.S.C. 103(a) as being unpatentable over Mate et al. (US 2002/0193685) in view of Cosman (US 2002/0065461) as applied to claims 1 and 14 above, and further in view of Fitzpatrick et al. (US 6073044).

Fitzpatrick et al. disclose a method for determining the location in physical space of a point of a fiducial marker. Fitzpatrick et al. teach that a rigid body transform is necessary to register and align the coordinate systems of two imaging modalities (column 1, lines 42-58). A rigid body transform technique is old and well known in the art.

It would have been obvious to one of ordinary skill in the art, at the time the invention was made, to have used a rigid body transform technique as taught by Fitzpatrick et al., in the combined system of Mate et al. and Cosman. When using two imaging modalities, such a technique will allow for the two imaging spaces to be

properly registered and aligned, and thus the markers in the two images to be aligned. This will allow for the proper positioning adjustment to be determined and executed.

Also, it would have been obvious to have used the same angle for image as for a treatment beam, as this will reduce the amount of time between acquiring images and moving the treatment system into the proper location, because it is already in the proper location. A shorter time between imaging and treatment will prevent more motion from occurring in between, which would reduce the accuracy of the system.

Claims 73 and 75 are rejected under 35 U.S.C. 103(a) as being unpatentable over Mate et al. (US 2002/0193685) in view of Cosman (US 2002/0065461) and Fitzpatrick et al. (US 6073044) as applied to claim 64 above, and further in view of Carol (US 5622187).

Carol discloses a method and apparatus for patient positioning for radiation therapy. Carol teaches that multiple positioning images can be acquired and a triangulation technique used (column 8, line 61-column 9, line 25).

It would have been obvious to one of ordinary skill in the art, at the time the invention was made, to have acquired images from different angles as taught by Carol in the combined system of Mate et al. and Cosman. Acquiring an image from more than one angle provides additional data that can be used for three-dimensional reconstruction. If the images were acquired at the same angle, this would not be possible.



Claims 85-86 are rejected under 35 U.S.C. 103(a) as being unpatentable over Mate et al. (US 2002/0193685) in view of Cosman (US 2002/0065461) as applied to claims 1 and 58 above, and further in view of Ishikawa et al. (US 6398710).

Ishikawa et al. disclose a radiation dosimetry system. Ishikawa et al. teach the use of implantable devices which measure the radiation delivered to the target site (column 4, lines 25-50).

It would have been obvious to one of ordinary skill in the art, at the time the invention was made, to have modified the combined system of Mate et al. and Cosman to measure the radiation dosage at the target site as taught by Ishikawa et al. Such techniques are well known in the art, and are commonly used in radiation treatment systems, as they allow the physician to determine the optimal radiation dose to treat the patient with, without damaging nearby healthy tissue.

### ***Response to Arguments***

Applicant's arguments filed 10/27/09 have been fully considered but they are not persuasive.

In response to applicant's arguments against the references individually, one cannot show nonobviousness by attacking references individually where the rejections are based on combinations of references. See *In re Keller*, 642 F.2d 413, 208 USPQ 871 (CCPA 1981); *In re Merck & Co.*, 800 F.2d 1091, 231 USPQ 375 (Fed. Cir. 1986).

In regards to applicant's arguments that Cosman does not teach or enable determining coordinates of the same set of markers relative to a first and second beam isocenter, this limitation is taught in combination with the Mate and Cosman references. Mate shows determining the coordinates of markers relative to first and second beam isocenters. The Cosman reference is provided to teach a variety of limitations but in general to illustrate the use of an imaging system to locate markers.

Applicant further argues that it would not be obvious to combine the references, however the examiner respectfully disagrees. The references are in the same field of endeavor as both relate to position determination of markers for aligning a patient for radiation treatment. The fact that one reference may not "require" a certain feature is irrelevant. Certainly, if the reference would "require" such a feature, it would already be in the reference, or otherwise be incomplete. A 103 rejection is used to teach that such an additional feature is known in the art, and it would be obvious to include that feature in the invention. There are a wide variety of different techniques for determining the position of markers in the body, for aligning a patient, for imaging a patient, etc. It would be obvious to one of ordinary skill in the art to use these different techniques depending on the user's design choice. This is illustrated for example by Mate in paragraph [0074].

Specifically, applicant argues that "even if Cosman were combined with Mate, the combination does not enable determining first and second coordinates of the markers relative to a first and second beam, as required by claim 1 because neither reference coordinates images from two beams of two different imaging modes". The examiner finds this argument confusing, as the claimed beam isocenters refer to the treatment

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beam isocenters (as is clear in claim 2), not the beams of the imaging systems. As shown in Mate, two beam isocenters are tracked and aligned to ensure that the patient and the internal site to be treated are properly aligned with the radiation treatment machine. The position of the markers is determined using a radiofrequency technique. Thus, the Cosman reference is provided to illustrate that the position of markers can also be determined by imaging. Thus, the combination of the references meet the claim limitations.

Applicant further argues that the markers are not implanted completely within the body, however examiner respectfully disagrees. Mate shows that the markers can be permanently implanted into the patient via an applicator needle ([0041]). Cosman also shows that the markers can be implanted in tissue ([0067]). Applicant apparently argues that the markers used for the camera system of Cosman are not completely within the body, which would be true as a camera system would require direct line of sight with the markers. However, the examiner does not rely upon those markers in the rejection. Instead, as is clear in the rejection, the examiner relies upon the markers taught in paragraphs ([0064]-[0069]), which are radiopaque markers used in x-ray imaging. Cosman also refers to earlier used radiopaque markers during the initial CT scan in [0052]. Such markers do not require direct line of sight in order to function, as is known in the art. Thus, applicants argument is irrelevant and not directed to the same markers relied upon by the examiner. The statement of Cosman in paragraph [0067] that the markers are implanted in tissue within the patient is sufficient. Both the Mate and Cosman references teach implanting markers within the patient.

In regards to applicant's arguments regarding the Ishikawa reference, examiner respectfully disagrees. Ishikawa teaches that implanted devices can be used to measure the radiation delivered to a target site. Measuring the radiation at the site is commonly used in radiation treatment systems, as it is imperative for the operator to prevent healthy tissue from being damaged, and to prevent overexposure to the patient. Such a radiation detection system could be combined with the sensors of Mate or Cosman. The examiner disagrees that the systems would interfere with one another. It is well known that such interference can be prevented in a variety of methods, such as using different frequencies, or operating the devices at separate times. For example, the device of Mate uses multiple markers and can distinguish between them by using frequency multiplexing [0049]. Ishikawa teaches that the frequency of an electromagnetic wave used to power the transponder is different from the frequency used to transmit the data (paragraph bridging columns 9 and 10). One of ordinary skill in the art would not be prevented from combining such references. As illustrated throughout the references, there are a variety of different types of markers, methods for positioning, imaging, etc. that are known in the art and it would be obvious to one of ordinary skill in the art to substitute and combine these different modalities, as they all yield the same end result of aiding in patient positioning for radiation treatment.

As a final matter, applicant makes several other arguments directed at "false markers of claim 12", which is not found in the claim; and the gantries of claim 60, of which the claim has been cancelled.

***Conclusion***

**THIS ACTION IS MADE FINAL.** Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the mailing date of this final action.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Jonathan G. Cwern whose telephone number is (571)270-1560. The examiner can normally be reached on Monday through Friday 9:30AM - 6:00PM EST.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Brian Casler can be reached on 571-272-4956. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

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Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

/Jonathan G Cwern/  
Examiner, Art Unit 3737

/BRIAN CASLER/  
Supervisory Patent Examiner, Art  
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